

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Anticipated Classification of This Application: Class

Subclass

Prior Application: Examiner S. Patel Art Unit 1624

COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313-1450



Sir:

Transmitted herewith for filing is a divisional under 37 C.F.R 1.53b, of pending prior Application Serial No. 09/963,926 filed on September 26, 2001, which claims priority from United States Provisional application Serial No. 60/235,617 filed September 27, 2000, and Serial No. 60/241,633 filed October 10, 2000, both now abandoned of Peter Ruminski, Thomas D. Penning, Lan Jiang, Balekudru Devadas, Thomas Rogers, Jennifer VanCamp, and Chester Yuan entitled LACTONE INTEGRIN ANTAGONISTS

[X] Enclosed is a copy of the prior application, including the Oath of Declaration as originally filed November 26, 2001 and the Assignment as originally filed October 30, 2002. I hereby verify that the attached papers are a true copy of said prior application as originally filed on August 29, 2001.

[] Cancel in this application, original Claims ____ of the prior application before calculating the filing fee. (At least one original, independent claim must be retained for filing purposes)

[X] Amend the specification by inserting before the first line the sentence: --This application is a divisional application of U.S. application Ser. No. 09/963,926, filed September 26, 2001, now allowed, which claimed priority under Title 35, United States Code §119 of United States Provisional Applications Ser. No. 60/235,617 filed September 27, 2000 and Ser. No. 60/241,633, filed October 10, 2000, both now abandoned.

[X] A preliminary amendment is enclosed.

[X] The filing fee is calculated below:

Basic Filing Fee [37 CFR 1.16(a)]				\$ 770.00
Additional Filing Fee [37 CFR 1.16(b), (c)]				
Claims	No. Filed	No. Extra	Rate	
Independent	2 - 3 =	0	X \$84.00 =	
Total	16 - 20 =	0	X \$18.00 =	
SUB-TOTAL:				\$ 770.00

Multiple Dependent Claims Fee 290.00

TOTAL FEE \$1,060.00

[X] A triplicate copy of this transmittal paper is enclosed.

[X] Please charge the above calculated total fee to my Deposit Account No. 19-1025.

[X] The Commissioner is hereby authorized and requested to charge any fees in addition to the above as well as all future fees set forth in 37

CFR 1.16 and 1.17 which may be required during the entire pendency of this Application, and credit any overcharges to Deposit Account No. 19-1025 [37 CFR 1.25(b)].

NOTE: THIS AUTHORIZATION DOES NOT INCLUDE FEES REQUIRED UNDER 37 CFR 1.18

☐ Transfer the drawings from the prior application to this application and abandon said prior application as of the filing date accorded this application. ANOTHER DUPLICATE COPY OF THIS SHEET IS ENCLOSED FOR FILING IN THE PRIOR APPLICATION FILE.

☐ New formal drawings are enclosed.

☐ Priority of Application Serial No. _____, filed on _____ in _____ (country) is claimed under 35 U.S.C. 119.

☐ The certified copy of the priority application has been filed in prior Application Serial No. _____, filed _____.

☒ The prior application is assigned of record to Pharmacia Corporation, Corporate Patent Department, 800 North Lindbergh, St. Louis, Missouri 63167.

☒ The Power of Attorney in the prior application is to Rachel A. Polster, Registration Number 47,004.

☒ The power appears in the original papers in the prior application.

☐ Since the power does not appear in the original papers, a copy of the power in the prior application is enclosed.

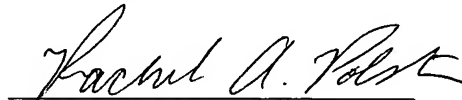
☐ Enclosed is a copy of the Associate Power of Attorney from _____

☒ Address all future communications to:

Pharmacia Corporation
Global Patent Department
P. O. Box 1027
St. Louis, Missouri 63006

The undersigned declares further that all statements made herein of his own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date: Nov. 19, 2003


Rachel A. Polster
Agent for Applicants
Registration No. 47,004
314-274-7354 (St. Louis)

CERTIFICATE OF MAILING BY EXPRESS MAIL (37 CFR 1.8)

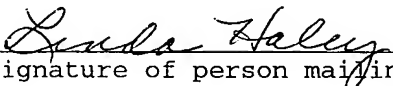
Serial No: Not Assigned
Filing Date: November 19, 2003
Group Art Unit: Not Assigned
Docket No: 3392/0A
Invention: Lactone Integrin Antagonists

Date of Deposit: November 19, 2003

I hereby certify that these papers or fee is being deposited with the United States Post Office to Addressee service under 37 CFR 1.10 & 1.8 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450:

Fee Transmittal
Divisional Transmittal Sheet
Copy of Specification
Copy of Joint Declaration and Power of Attorney
Copy of Assignment
Amendment
Return Postcard

Linda Haley
(Typed or printed name of person mailing paper or fee)


(Signature of person mailing paper or fee)

EXPRESS MAIL NO: EV 397361419 US

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **\$1,060.00**

Complete if Known

Application Number	Unknown
Filing Date	November 19, 2003
First Named Inventor	Ruminski
Examiner Name	Not Assigned
Group Art Unit	Not Assigned
Attorney Docket No.	3392/OA

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: **19-1025**

Deposit Account Name: **Pharmacia Corporation**

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	770.00
1002	330	2002	165	Design filing	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$) \$770.00

2. EXTRA CLAIM FEES FOR UTILITY AND

Extra Claims **Fee from below** **Fee Paid**

Total Claims **16** - 20** = **0** X **0.00** = **0.00**

Independent Claims **2** - 3** = **0** X **0.00** = **0.00**

Multiple Dependent **290.00** = **290.00**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) **\$290.00**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non - English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR § 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Statement	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

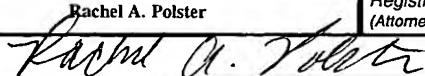
Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

SUBMITTED BY

Name (Print/Type)	Rachel A. Polster	Registration No. (Attorney/Agent)	47,004	Telephone	314-274-7354
Signature		Date	November 19, 2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.